

CAUSE NUMBER(S): \_\_\_\_\_

STATE OF TEXAS                                   §                         IN THE MUNICIPAL COURT

VS.                                                  §                         VILLAGE OF SALADO

  

\_\_\_\_\_ §                         BELL COUNTY, TEXAS

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Employer's Phone Number: \_\_\_\_\_

Marital Status: ☐ Married ☐ Single ☐ Divorced ☐ Widowed

Spouse's Name: \_\_\_\_\_ Spouse's Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Initial All That Apply

\_\_\_\_\_ The Court has advised me that I am responsible for satisfying the judgment and sentence  
 \_\_\_\_\_ in the amount of \$\_\_\_\_\_ in Cause Number \_\_\_\_\_  
 \_\_\_\_\_ in the amount of \$\_\_\_\_\_ in Cause Number \_\_\_\_\_  
 \_\_\_\_\_ in the amount of \$\_\_\_\_\_ in Cause Number \_\_\_\_\_

\_\_\_\_\_ I assert that I am too poor to pay the fine and costs immediately and that the following information is documentation that I have insufficient resources or income to pay today.

\_\_\_\_\_ I request that the Court extend the payment to a later date.

\_\_\_\_\_ I request that the Court grant a time payment plan.

\_\_\_\_\_ I request that I be able to discharge the fine and costs by performing community service, because I have no resources to pay and I am unable to pay the fine and costs.

\_\_\_\_\_ I have been determined to be indigent by the federal government and I am receiving or I am eligible to receive assistance under a federal program.

Name program: \_\_\_\_\_

YOUR INITIAL BY EACH OF THE FOLLOWING STATEMENTS INDICATES THAT YOU HAVE READ THE STATEMENT, UNDERSTAND IT, AND AGREE TO IT.

- \_\_\_\_\_ I promise that until my fines have been paid in full, I will notify this court in person or by first-class mail of any changes of my address or telephone number at the following address: Village of Salado, PO Box 219, Salado, Tx. 76571, within five days of the change.
- \_\_\_\_\_ I understand that I have a continuing obligation until my fines are paid in full to notify the court of any changes in my financial status that may hinder my ability to satisfy the judgement or help me satisfy the judgment.
- \_\_\_\_\_ I understand that if I pay any part of the fine, costs, or restitution on or after the 31<sup>st</sup> day after judgment was entered that I am responsible for paying a \$25.00 time payment fee.
- \_\_\_\_\_ I understand that submitting false financial information to the Court constitutes the crime of tampering with a governmental record, punishable by incarceration and/or the imposition of a fine. (Sec. 37.10, Penal Code) I swear that all the information in this application is true, correct, and complete to the best of my knowledge and belief.

Defendant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Request Granted: \_\_\_\_\_  
Judge Don Engleking Date

Request Denied: \_\_\_\_\_  
Judge Don Engleking Date

Order: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_